

## Protocol for Infant Transplantation

We propose cardiac homotransplantation in newborn infants with congenital cardiac malformations which are incompatible with long survival and which are inoperable by conventional surgical techniques. The recipient baby must have congenital heart disease of such severity that survival cannot be reasonably expected for more than 2-3 months, and whose cardiac malformation cannot be ameliorated by conventional surgical methods.

Donor infants are to be newborns with anencephaly. The transplantation is to be attempted only after the clinical death of the donor, such death to be allowed to occur from natural causes. Clinical death of the donor is defined as cessation of spontaneous coordinated visible respiratory activity and cessation of cardiac activity by auscultation. The recipient is not to be irretrievably committed to the transplantation procedure without prior inspection of the removed donor heart.

An effort will be made to match donor and recipient by histocompatibility testing in advance, and a program of prophylactic and therapeutic management of homograft rejection phenomena followed. Informed consent of parents of both donor and recipient infants is required.